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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/762,259	<b>FILING DATE</b> 02/02/2001 <b>RULE</b> _	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2681	<b>ATTORNEY DOCKET NO.</b> P010010
<b>APPLICANTS</b> Renate Zygan-Maus, Munchen, GERMANY;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/EP99/05651 08/04/1999				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 98114751.5 08/05/1998				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 03/19/2001				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Allowance</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 6
			<b>INDEPENDENT CLAIMS</b> 2	
<b>ADDRESS</b> 26574				
<b>TITLE</b> Method for administering a service for a subscriber				
<b>FILING FEE RECEIVED</b> 860	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 2819

<b>SERIAL NUMBER</b> 09/762,259	<b>FILING OR 371(c) DATE</b> 02/02/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2684	<b>ATTORNEY DOCKET NO.</b> SIEM0018U/US	
<b>APPLICANTS</b> Renate Zygan-Maus, Munchen, GERMANY; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP99/05651 08/04/1999 <b>** FOREIGN APPLICATIONS *****</b> GERMANY 98114751.5 08/05/1998 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/19/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 31518					
<b>TITLE</b> Method for administering a service for a subscriber					
<b>FILING FEE RECEIVED</b> 860	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		